DOCKET NO. SC11807T\$



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Joanna G. Chiu - 43,629

Subject:

10/008,121- William Roeckner

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## MESSAGE:

Enclosed herewith, please find a FORMAL AMENDMENT for filing in the below-identified application. If Applicant has overlooked any fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit 502117.

ALL ITE	MS MA	RKED WITH AN "X" ARE INCLUDED:			
1.	×	1 page Facsimile Cover Sheet			
2.	×	9 page Amendment			
3.	X	1 page Fee Transmittal (in duplicate)		•	
Paid	by D	eposit Account: 502117	\$84		

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## PLEASE GIVE THESE PAPERS TO:

EXAMINER: Blaine J. Jackson GROUP ART UNIT: 2685 SERIAL NO.: 10/008,121 FILED: NOVEMBER 5, 2001

INVENTOR: WILLIAM ROECKNER



CORPLAW 512 996 6853

	Complete If Known							
FEE	Application Nu	lication Number 10/008,121						
TRANSMITTAL	Filing Date		November 5, 2001					
	First Named In	ventor	Willia	m Roed	kner			
Patent fees are subject to annual revision	Examiner Nam	18	i –	J. Jac				
•	Group Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 84	Attorney Docke				:			
METHOD OF PAYMENT			FEI	CAL	CULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and	3. ADDI	TIONAL	FEES					
credit any overpayment to:	Larg Enti							
Deposit Account Number 502117			vx Fee	Fee .	Fee		:	
Deposit Account Name Motorola, Inc.		Code	(\$)	Code	(\$)	Ean Docarintian	:	
Charge Any Additional Fee required under 37 CFR 1.16 and 1.17		1051	130	2051	1 <i>P)</i> 65	Fee Description Surcharge - late Illing lee or oath		
X Charge Any Additional Fee required under 37 CFR 1.16 and 1.17		1052	50	2052	25	Surcharge - late Provisional filing	+-+	
Applicant claims small entity status. See 37 CFR 1.27		1053	130	1053	130	Non-English specification		
	1812	2520	1812	2520	For filing a request for ex parte Reexamination			
2. Payment Enclosed:	1804	920°	1804	920*	Requesting publication of SIR prior to Examiner action			
Check Credit Card Money Order	Other	1805	1840°	1805	1840*	Requesting publication of SIR after Examiner action		
		1251	110	2251	55	Extension for reply within first month	∯— <b>—</b>	
FEE CALCULATION		1252	410	2252	205	Extension for raply within second month		
4 - PAGIO EU NO SEÉ	1253 1254	930 1450	2253 2254	485 725	Extension for reply within third month	<del>    </del>		
1. BASIC FILING FEE						Extension for reply within fourth month	<del> </del>	
A COLUMN TO THE TOTAL COLUMN TO THE COLUMN T		1265 1401	1970 320	2255 2401	985 160	Extension for reply within fifth month Notice of Appeal		
Large Entity Small Entity Fee Fee Fee Fee		1401	320	2402	160	Filing a brief in support of an appeal	<del></del>	
	e Pald	1403	280	2403	140	Request for oral hearing Petition to institute a public use		
ADDA TITO DODA TITE INTINGUIGADIA	_	1451 1452	1510 110	1451 2452	1510 55	proceeding Pelition to revive - unavoidable		
1001 750 <b>2001</b> 375 Utility filing fee 1002 330 2002 165 Design filing fee	<del></del> -  i	1453	1300	2453	650	Petition to revive - unintentional	-	
1003 520 2003 260 Plant filing fee		1501	1300	2501	650	Utility issue fee (or reissue)		
1004 750 2004 375 Reissus filing fee		1502	470	2502	235	Design issue fee		
1006 160 2005 80 Provisional filing fee		1503	630	2503	315	Plant issue iee	1	
SUBTOTAL (1) (\$)	<del></del>	1460 1807	130 60	1460 1807	· 130 50	Pelitions to the Commissioner Processing fee under 37 CFR 1.17(q)	1	
SUBTOTAL (1)   (\$)  2. EXTRA CLAIM FEES		1808	180	1806	180	Submission of IDS		
Previously Extra Fee from	`	8021	40	8021	40	Recording each patent assignment	:	
Paid*         Claims         below           Total Claims         20         22         =         0         X         18	= O	1809	750	2809	375	per property (times number of properties) Filling a submission after final rejection (37.CFR § 1.129(a))		
Independent = X X B4	= 84							
Multiple Dependent 280	=	1910	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	·	
Large Enlity Small Enlity Fee Fee Fee Fee		1801	750	2801	375	Request for Continued Examination (RCE)	ــــا	
Code (\$) Code (\$)   Fee Descripti   1202 18 2202 9 Claims in excess of 20	on	1802	900	1802	900	Request for expedited examination of a design application		
1201 84 2201 42 Independent claims in excess of 9		Other fee	(specify)			• • • • •		
1203 280 2203 140 Multiple dependent claim, if not pa 1204 84 2204 42 * Reissue independent claims ove					·		1	
1205 18 2205 9 'Relssue claims in excess of 20 a	nd over original			-				
paten!		<u> </u>				ALIBOARIA JAN ZAL	+	
SUBTOTAL (2) [(S) 84 "OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANI "For Reissues, see above	Œ.	* Reduced by Sasic Filing Fee paid SUBTOTAL (3) (\$)						
SUBMITTED BY		-			Complete (if applicable)			
(540) 60								
11/2/72003 HHUPKINS 10000000 502117 194/3/21								
Signature 1201 Date 11/3/03								
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